| 18. If a CONTINUING APP Sheet under 37 CFR 1.76: | LICATION, che | ck appropriate box ar | nd supply the requisit | e information below and in | ı a preliminary amer | ndment, or in an Application Data | | |
|---|----------------------|--------------------------------------|--|-----------------------------|-----------------------|---|--|--|
| ☐ Continuation Prior application information: | ner· | uation-in-part (CIP) | of the prior application No:/ Group/Art Unit: | | | | | |
| For CONTINUATION OR DIVI the disclosure of the accompanying inadvertently omitted from the su | | | e of the prior applicati nd is hereby incorpora | on from which as seth and | 1 | under Box 5b, is considered a part of elied upon when a portion has been | | |
| | | 19. C | ORRESPONDE | NCE ADDRESS | | | | |
| ■ Customer Number or Bar (| Code Label | 33751 | | | or ■ Correspond | ence address below | | |
| NAME Mich | | Michael F. So | Michael F. Scalise | | | | | |
| | Wilson Great | Wilson Greatbatch Technologies, Inc. | | | | | | |
| ADDRESS | | 10,000 Wehrl | e Drive | | | | | |
| CITY | Clarence | | STATE | New York | ZIP CODE | 14031 | | |
| COUNTRY | USA | | TELEPHONE | (716) 759-5810 | FAX | (716) 759-5074 | | |
| Name (Print/Type) | | Michael/F. Scalise | 0 1 | Registration No. (Attorn | ey/Agent) | 34,920 | | |
| Signature | | Markae | h/calse | | Date | November 21, 2003 | | |
| "Express Mail" Mailing Labe | Number EU94 | 0429279US | Date of | Deposit November 21, 20 | 003 | | | |
| 1.10 on the date indicated abo | iat this paper or fe | ed to the Commission | with the United State | s Postal Service "Express N | Mail Post Office to A | Addressee" service under 37 CFR | | |

bruels

1.10 on the date indicated above and is addressed to the Commissioner for Patents, Alexandria, VA 22313-1450.

Rosemarie Contella

Name

PTO/SB/17 (11/01) Approved for use through 10/31/2002, OMB 0651-

FEE TRANSMITTAL for FY 2002

Patent Fees are subject to annual revision.

 $\,$ G $\,$ Applicant claims small entity status. See 37 CFR 1.27.

TOTAL AMOUNT OF PAYMENT (\$)1,002.00

| Application Number | | |
|------------------------|-------------------|--|
| Filing Date | November 21, 2003 | |
| First Named Inventor | O'Brien et al. | |
| Examiner Name | | |
| Group/Art Unit | | |
| Attorney Docket Number | 31611.0028 | |

| TOTAL AMOUNT OF PAYMENT (\$) | 1,002.00 | | Α | ttorney Do | cket Number | 31011.0026 | | |
|---|-----------------|-----------------------------|--|--------------|-------------|--|-------------|--|
| METHOD OF PAYMENT (check all that apply) | | FEE CALCULATION (continued) | | | | | | |
| O Check Credit Card G Money Order G Other G None | | 3. ADDI | 3. ADDITIONAL FEES | | | | | |
| Deposit Account: Deposit Account Number: 502460 | | Large | e Entity | Smal | l Entity | | | |
| Deposit Account Name: The Commissioner is hereby authorized to (check all that apply) | | Fee Code | Fee (\$) | Fee Code | Fee (\$) | Fee Description | Fee Paid | |
| G Charge fee(s) indicated below | | 105 | 130 | 205 | 65 | Surcharge - late filing fee or oath | \$ | |
| Charge any fee deficiencies or credit any overpaym | | | | 1 | | | | |
| G Charge any additional fees during pendency of this | • • | 127 | 50 | 227 | 25 | Surcharge - late provisional filing fee or cover sheet | \$ | |
| G Charge fees indicated below, except for the filing fee to the above-identified deposit account | | 139 | 130 | 139 | 130 | Non-English specification | \$ | |
| FEE CALCULATION | FEE CALCULATION | | | 147 | 2,520 | For filing a request for ex parte reexamination | \$ | |
| 1. BASIC FILING FEE Large Entity Small Entity | _ | 112 | 920* | 112 | 920* | Requesting Publication of SIR prior to Examiner Action | \$ | |
| Fee Fee Fee Fee Code (\$) Code (\$) Fee Description | Fee Paid | 113 | 1,840* | 113 | 1,840* | Requesting Publication of SIR after Examiner Action | \$ | |
| 101 770 201 385 Utility filing fee | \$770 | 115 | 110 | 215 | 55 | Extension for reply within first month | \$ | |
| 106 340 206 170 Design filing fee | \$ | 116 | 420_ | 216 | 210 | Extension for reply within second month | \$ | |
| 107 530 207 265 Plant filing fee | \$ | 117 | 950 | 217 | 475 | Extension for reply within third month | \$ | |
| 108 770 208 385 Reissue filing fee | \$ | 118 | 1,480 | 218 | 740 | Extension for reply within fourth month | \$ | |
| 114 160 214 80 Provisional filing fee | \$ | 128 | 2,010 | 228 | 1,005 | Extension for reply within fifth month | \$ | |
| SUBTOTAL (1) | \$770 | 119 | 330 | 219 | 165 | Notice of Appeal | \$ | |
| 2. EXTRA CLAIM FEES FOR UTILITY/ REISSUE Extra Fee from | E Fee Paid | 120 | 330 | 220 | 165 | Filing a brief in support of an appeal | \$ | |
| Claims below Total Claims / 26 / - 20** = /6 / x / 18 / | = \$108 | 121 | 290 | 221 | 145 | Request for oral hearing | \$ | |
| Independent Claims / 4/- 3** = /1 / x /84/= | \$84 | 138 | 1,510 | 138 | 1,510 | Petition to institute a public use proceeding | \$ | |
| Multiple dependent / / x / / = | \$ | 140 | 110 | 240 | 55 | Petition to revive - unavoidable | \$ | |
| Large Entity Small Entity | | 141 | 1,330 | 241 | 665 | Petition to revive - unintentional | \$ | |
| Fee Fee Fee Fee Code (\$) Code (\$) Fee Description | | 142 | 1,330 | 242 | 665 | 10 advance copies Utility issue fee (or reissue) | \$ \$ | |
| 103 18 203 9 Claims in excess of 20 | | 143 | 480 | 243 | 240 | Design issue fee | \$ | |
| 102 86 202 43 Independent claims in excess of 3 | | 144 | 640 | 244 | 320 | Plant issue fee | \$ | |
| 104 290 204 145 Multiple dependent claim if not paid | | 122 | 130 | 122 | 130 | Petitions to the Commissioner | \$ | |
| 109 86 209 43 **Reissue independent claim original patent | | 123 | 50 | 123 | . 50 | Processing fee under 37 CFR 1.17(q) | \$ | |
| 110 18 210 9 **Reissue claims in excess of over original patent | 20 and | 126 | 180 | 126 | 180 | Submission of Information Disclosure Statement | \$ | |
| \$UBTOTAL (2) | \$192 | 581 | 40 | 581 | 40 | Recording each patent assignment per property (times number of properties) | \$40 | |
| SIGNATURE: Milvaio | alise | 146 | 770 | 246 | 385 | Filing a submission after final rejection(37 CFR 1.129(a)) | \$ | |
| Michael F. Scalise Reg. No. 34,920 | | 149 | 770 | 249 | 385 | For each add'l invention to be examined(37 CFR1.129(b) | \$ | |
| DATE: November 21, 2003 Telephone: (716) 75 | | 179 | 770 | 279 | 385 | Request For Continued Examination (RCE) | \$ | |
| 100phone (110) 13 | | 169 | 900 | 169 | 900 | Request for Expedited Examination of a design appln. | \$ | |
| · | | | Other fee (specify) | | | | s | |
| | | | *Reduced by basic filing fee paid SUBTOTAL (3) | | | | \$40 | |
| | | Reduce | u by basic fi | mig ice paid | | SUBTUTAL (3) | <u> </u> | |

| Express Mail Mailing Label Number <u>EU940429279US</u> | Date of Deposit | November 21, 2003 | | |
|---|--------------------------------|---------------------------|-------------------------|----------------|
| I hereby Certify that this paper or fee is being deposited with the United States Po | ostal Service "Express Mail Po | ost Office To Addressee": | service under 37 CFR 1. | 10 on the date |
| indicated above and is addressed to: Commissioner for Patents. Alexandria, VA 22313-140 | | | | |

| Rosemarie Contella | (|
|--------------------|---|
| Name | _ |

Assenarie attela

November 21, 2003
Date of Signature